

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	W/A		08-29-01
O.I.P.E. CLASSIFIER	W/S	10	9-5-01
FORMALITY REVIEW		1020	8/12/01
RESPONSE FORMALITY REVIEW	H-S	866	01-02-02

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral).... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date
1	Original
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
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Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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25/01/02

6/2/02